UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

559 Mail Processing Section

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FORM D

APR 2 1 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Mashington, DC

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEI	VED			

OMB APPROVAL

Name of Offering (check if this is an amendment and name has changed, and in	dicate change.)						
Limited Partnership Interests in Bain Capital X Coinvestment Fund, L.P.							
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506	☐ Section 4(6) ☐ ULOE						
Type of Filing: New Filing Amendment							
A. BASIC IDENT	TIFICATION DATA						
Enter the information requested about the issuer							
Name of Issuer (check if this is an amendment and name has changed, and indic	cate change.)	I CARILL BRIRI CALL RANG BIBLE BURB HITTE BALDI BUR CARL					
Bain Capital X Coinvestment Fund, L.P.	• .						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (in	28 17 8 17 28 17 8 18 27 18 18 18 18 18 18 18 1					
111 Huntington Avenue	(617) 516-2000	TOTAL REPORT OF THE PART AND THE PARTY					
Boston, MA 02199		08046305					
Address of Principal Business Operations (Number and Street, City, State, Zip Cod	iding Area Code)						
(if different from Executive Offices)							
Brief Description of Business							
Private Investment Fund.							
Type of Business Organization							
☐ corporation ☐ limited partnership, already formed							
	other (please specify); Cayman I	slands exempted limited partnership					
□ business trust □ limited partnership, to be formed							
Month Yea		PPOCESSED					
Actual or Estimated Date of Incorporation or Organization: 0 7 0	7 🖾 Actual 🗌 Estimated	PROCESSED					
CN for Canada; FN for oth		APR 282008					
GENERAL INSTRUCTIONS		THOMSON DELITEDS					

IUOMOOM KERIEKS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - X Each promoter of the issuer, if the issuer has been organized within the past five years;
 - X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - X Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General Partner					
Full Name (Last name first, if individual)										
Bain Capital Partners X, L.P.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
111 Huntington Avenue, Boston, MA 02199										
	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General Partner of the GP					
Full Name (Last name first, if in	dividual)									
Bain Capital Investors, LLC	(N1	1 Court Circ Court 7	C-1-\		119.11					
Business or Residence Address (Number and Street, City, State, Zip Code) 111 Huntington Avenue, Boston, MA 02199										
			D. Francisco Officer	Dinastan	Companies Managing Postnor					
	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if in-	dividual)									
Bain Capital, LLC										
Business or Residence Address (•	• • • • • •	Code)							
111 Huntington Avenue, Bosto										
	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if in	dividual)									
Bain Capital Partners, LLC	<u> </u>	10 0 0 7	<u> </u>							
Business or Residence Address (Code)							
111 Huntington Avenue, Bosto		_	№ : 055							
	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if in	dividual)									
Albright, Richard C.										
Business or Residence Address (Code)							
111 Huntington Avenue, Bosto										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, if in	dividual)									
Balson, Andrew B.										
Business or Residence Address (
c/o Bain Capital Investors, LLo			·							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if in-	dividual)		•							
Barnes, Steven W.										
Business or Residence Address (
c/o Bain Capital Investors, LLG	C, 111 Hun	tington Avenue, Bostor	ı, MA 02199							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, if in	dividual)									
Bekenstein, Joshua					<u></u>					
Business or Residence Address (•		•							
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if individual)										
Biffar, Ulrich F.										
Business or Residence Address (
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199										

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Clayson, Davis					
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,	LLC, 111 Hur	ntington Avenue, Bosto	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Connaughton, John P.			<u> </u>		
Business or Residence Addr					
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Corrigan, Jay P.	if individual)				
Business or Residence Addr	ess (Number an	d Street City State Zin	Code)		
c/o Bain Capital Investors,					
Check Box(es) that Apply:		☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,		_ 			
Doherty, Sean M.					
Business or Residence Addr					
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, Edgerley, Paul B.	if individual)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,	,		•		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		_		
Goss, Michael F.	,				
Business or Residence Addr					
c/o Bain Capital Investors,		ntington Avenue, Bosto	n, MA 02199	<u></u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Gross-Loh, David					·
Business or Residence Addr					
c/o Bain Capital Investors,				□ D:	Comment and the Managine Bostons
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Hildebrandt, James H. Business or Residence Addr	ace (Number on	d Street City State 7in	Code		
c/o Bain Capital Investors,		-			
Check Box(es) that Apply:	-	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,					
Hitch, S. Jordan	ii iidividaai)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Hori, Shintaro	,				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Huang, Jingsheng					
Business or Residence Addr	•		•		
c/o Bain Capital Investors,	LLC, 111 Hur	itington Avenue, Bosto	n, MA 02199		

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
Levin, Matthew S.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner				
Full Name (Last name first, if	f individual)				-				
Loring, Ian K.									
Business or Residence Address	,		•						
c/o Bain Capital Investors, I	LLC, 111 Hun		n, MA 02199						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
Loughlin, Philip H.			· · · · · · · · · · · · · · · · · · ·						
Business or Residence Address									
c/o Bain Capital Investors, I									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if Merry del Val, Felipe	findividual)								
Business or Residence Addres	ss (Number an	d Street, City, State, Zip	Code)						
c/o Bain Capital Investors, I									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
Nunnelly, Mark E.									
Business or Residence Address	•		•						
c/o Bain Capital Investors, I	LLC, 111 Hun	ntington Avenue, Boston	n, MA 02199						
	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
Pagliuca, Stephen G.		10 0 0 0	<u> </u>	_					
Business or Residence Address	•		•						
c/o Bain Capital Investors, I					ПС 1 1/ Marrian Виден				
Check Box(es) that Apply:		Beneficial Owner		Director	General and/or Managing Partner				
Full Name (Last name first, if Plantevin, Michel G. P.	individuai)								
Business or Residence Address	ss (Number an	d Street, City, State, Zin	Code)						
c/o Bain Capital Investors, I									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner				
Full Name (Last name first, if	 f individual)								
Poler, Dwight M.	,								
Business or Residence Address	ss (Number an	d Street, City, State, Zip	Code)						
c/o Bain Capital Investors, I	LLC, 111 Hun	itington Avenue, Bostoi	n, MA 02199						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
Reynolds, Ian									
Business or Residence Address									
c/o Bain Capital Investors, I				<u> </u>					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Sarkis, S. Walid	Full Name (Last name first, if individual) Sarkis, S. Walid								
Business or Residence Address	•		•						
z/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199									

				,					
Check Box(cs) that Apply:	Promoter	Beneficial Owner		☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, if individual)									
Shiroshita, Junichi									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bosto	on, MA 02199						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Siefke, Michael									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bosto	on, MA 02199						
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Sivolella, Eileen									
Business or Residence Addr									
c/o Bain Capital Investors,	LLC, 111 Hu		on, MA 02199						
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Sugimoto, Yuji									
Business or Residence Addr	•		•						
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bosto	n, MA 02199						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first, Thorndike, Benjamin	if individual)				•				
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zir	Code)						
c/o Bain Capital Investors,									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, Ward, Michael D.	if individual)								
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zir	Code)						
c/o Bain Capital Investors,									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first,									
Zhu, Jonathan									
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zip	Code)						
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bosto	n, MA 02199						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Zide, Stephen M.									
Business or Residence Addr									
c/o Bain Capital Investors,	LLC, 111 flu	ntington Avenue, Bosto	on, MA 02199						

					B. INFO	RMATIO	N ABOU	T OFFER	RING					
1. Has th	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes □	No ⊠					
				,	Answer also	in Append	lix, Columr	2, if filing	under ULO	E.				
2. What	What is the minimum investment that will be accepted from any individual? *Subject to discretion of the General Partner											\$ 25,00	\$ 25,000,000*	
3. Does	the offering	pennit joir	nt ownership	of a single	e unit?	*******************	***************	************************			*****************		Yes ⊠	No
remun persor five (5 only.	neration for n or agent o o) persons to	solicitation f a broker o o be listed a	of purchase r dealer reg are associate	ers in conne istered with	ection with . 1 the SEC a	sales of sec nd/or with	urities in th a state or st	e offering. ates, list the	If a person name of th	to be listed te broker or	nission or si Lis an assoc dealer. If i broker or d	iated nore than		_
Full Name (L N/A			•											
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)								
Name of Ass	ociated Bro	ker or Deal	er	·	-									
States in Whi	ich Person I	Listed Has !	Solicited or	Intends to	Solicit Purc	hasers								· · ·
(Check	"All States	" or check i	ndividual S	tates)		•••••					All States			
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (L	ast name fi	rst, if indiv	idual)				. ,							
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)					,			
Name of Ass	ociated Bro	ker or Deal	er											
States in Whi	ich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers								
(Check "All S	States" or cl	heck individ	dual States)				***************************************	***************************************			All States			
[AL] [IL] [MT] [RI] Full Name (L	[AK] [IN] [NE] [SC] ast name fi	[AZ] [IA] [NV] [SD]	(AR) (KS) (NH) (TN)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M1] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Business or F				treet City	State 7in (Code)								
				incer, City,	State, Zip e	.ouc)								
Name of Ass														
States in Whi														
(Check "All S	States" or cl	heck individ	lual States)			(**************************************	***************************************				All States			
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	(AZ) (IA) (NV) (SD)	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	(HI) [MS] [OR] [WY]	[ID] (MO) [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate Offering	Amount Already
	Type of Security	Price	Sold
	Debt	<u>\$</u>	\$
	Equity	<u>\$</u>	\$
	☐ Common ☐ Preferred		1
	Convertible Securities (including warrants)	<u> </u>	\$
	Partnership Interests	\$ 1,792,220,000	\$ 1,792,220,000
	Other (Specify)	<u>\$</u>	\$
	Total	\$ 1,792,220,000	\$ 1,792,220,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	118	\$ 1,792,220,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		S
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		s
	Regulation A		\$
	Rule 504		\$
	Total		S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$ 1,000,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	_ ⊠	\$ 1,000,000

	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
4.		ng price given in response to Part C - Question I and total 4.a. This difference is the "adjusted gross proceeds to the		\$ 1,791,220,000
5.	the purposes shown. If the amount for any purpose i	reeds to the issuer used or proposed to be used for each of is not known, furnish an estimate and check the box to the must equal the adjusted gross proceeds to the issuer set		
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		□ \$	□ s
	Purchase of real estate		\$	□ \$
	Purchase, rental or leasing and installation of machin	nery and equipment	□\$	□ \$.
	Construction or leasing of plant buildings and facilit	ies	□ \$	□ \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets pursuant to a merger)		□ s	□s
	Repayment of indebtedness		☐ \$	□ \$
	Working capital		s	□ s
	Other (specify): Investments in securities and activ	vities necessary, convenient or incidental thereto.	□ s	⊠ \$ 1,791,220,000
	Column Totals		s	⊠ \$ 1,791,220,000
	Total Payments Listed (column totals added)		⊠ \$ 1,7	91,220,000
		D. FEDERAL SIGNATURE		
n u		undersigned duly authorized person. If this notice is filed un es and Exchange Commission, upon written request of its sta- de 502.		
lss Ba	uer (Print or Type) in Capital X Coinvestment Fund, L.P.	Signature Date Apr	ii 17 , 2008	
		Title of Signer (Print or Type) Managing Director of the General Partner of the Genera	l Partner of the Issue	r

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

END